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Inflammatory bowel disease

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Inflammatory Bowel Disease (IBD), comprising Crohn's disease and ulcerative colitis, represents a chronic, relapsing-remitting inflammatory disorder of the gastrointestinal tract with significant global health impact. Its incidence has increased markedly over the past decades, particularly in developing regions undergoing rapid urbanization. While the exact etiology of IBD remains multifactorial, current evidence indicates a complex interplay among genetic susceptibility, environmental triggers, gut microbiota dysbiosis, and dysregulated mucosal immune responses. These interactions lead to chronic intestinal inflammation, epithelial barrier dysfunction, and progressive tissue damage.

Clinically, IBD manifests with abdominal pain, diarrhoea, rectal bleeding, weight loss, extraintestinal complications, and impaired quality of life. Diagnosis relies on a combination of endoscopic evaluation, histopathology, biomarkers, and advanced imaging. Despite substantial advancements, early detection remains challenging due to overlapping symptoms with infectious and functional bowel disorders.

Therapeutic strategies for IBD have expanded significantly, moving beyond traditional corticosteroids and immunomodulators. Biologic agents targeting TNF- α , IL-12/23 pathways, integrins, and JAK inhibitors have transformed disease management, providing improved remission rates and

mucosal healing. Recent research highlights the importance of personalized medicine through biomarker-guided therapy, microbiome modulation, nutritional interventions, and emerging cell-based treatments, including mesenchymal stem cell therapy. Additionally, non-invasive monitoring using faecal calprotectin and novel imaging biomarkers is improving long-term disease assessment and relapse prediction.

Despite these advances, unmet needs remain in understanding disease heterogeneity, preventing complications, and improving patient-centric outcomes. Future directions focus on precision therapeutics, early intervention strategies, and integrative approaches combining pharmacological, dietary, and lifestyle management to optimize long-term remission.

Biography

Dr. Jessie Calvin (M.B.B.S., FEM) is a dedicated physician serving as a Medical Officer with a reputed NGO associated with HelpAge India. He works extensively among rural and tribal communities, providing essential medical care and outreach services. His role involves coordinating community health initiatives and improving access to primary healthcare. Dr. Calvin collaborates closely with various NGO networks to strengthen public health support systems. He is committed to geriatric care, preventive medicine, and community-based health programs. His work reflects a strong passion for humanitarian service and equitable healthcare delivery.